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CONFIRMATION NO. 5803

SERIAL NUMBER 09/940,722	FILING OR 371(c) DATE 08/27/2001 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. PRES06-00217	
APPLICANTS Ronald A. Schachar, Dallas, TX;					
** CONTINUING DATA ***** This application is a CON of 09/061,168 04/16/1998 PAT 6,280,468 which is a CIP of 08/946,975 10/08/1997 PAT 6,007,578					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/17/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 13	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS 23990					
TITLE SCLERAL PROSTHESIS FOR TREATMENT OF PRESBYOPIA AND OTHER EYE DISORDERS					
FILING FEE RECEIVED 3918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		